

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY				
CLAIMS							
REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDIT. FEE	
TOTAL	35	-	30	= 5	x \$ 18.00	= \$ 90.00	
INDEP.	3	-	3	= 0	x \$ 86.00	= \$ 0.00	
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ \$ 0.00	= \$ 0.00		
					TOTAL ADDIT. FEE	\$ 90.00	

No additional fee for claims is required.

FEE PAYMENT

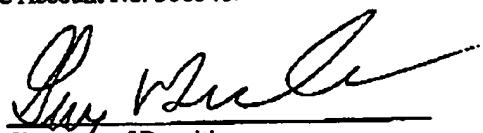
5. Authorization is hereby made to charge the amount of \$1,0400.00 to Deposit Account No. 500348.

Charge any additional fees required by this paper or credit any overpayment in the manner authorized above.

FEE DEFICIENCY

6. An additional extension and/or fee is required, charge Account No. 500348.

An additional fee for claims is required, charge Account No. 500348.



Signature of Practitioner

Reg. No.: 45,302
Tel. No.: 650-620-5501
Customer No.: 21968

Guy V. Tucker
Nektar Therapeutics
150 Industrial Road
San Carlos, CA 94070

BEST AVAILABLE COPY

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